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ABSTRACT

Presented at the Annual Program Meeting of the Council on Social Work Education in 1979, the paper extensively reviews the literature on child abuse, and provides a knowlege base to generate constellations of skills to guide child abuse practitioners' activity in dealing with child abuse cases. A multicausal model encompassing the interactive nature of the various elements involved in child abuse is suggested. Studies reviewed include those investigating hormonal influence, genetic factors, brain dysfunction, aggressive behavior, family size, marital discord, and the role of the child in abuse. Two major social work responsibilities in respect to child abuse are underlined by the research. On one level, it is proposed that social workers need preactive skills designed to identify potential child abusers before violence to a child occurs. On the other level, it is suggested that social work skills must be directed to assisting families in establishing more meaningful relationships and communication patterns with each other, as well as in learning appropriate child-rearing and disciplining skills so that further incidents of child abuse will not occur. (Author/DLS)

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THE USE OF RESEARCH IN TEACHING PRACTICE SKILLS IN CHILD PROTECTIVE SERVICES

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THE USE OF RESEARCH IN TEACHING PRACTICE SKILLS IN CHILD PROTECTIVE SERVICES

Paul Sachdev, Ph.D. and J. Victor Thompson, D.S.W.

Abstract - Based on the extensive review of a wide range of research studies on child abuse, a multicausal model encompassing the interactive nature of the various elements involved in child abuse is suggested. The research knowledge underlines two major social work responsibilities in respect to the problem of child abuse. On one level it is proposed that social workers need preactive skills designed to identify potential child abusers before violence to a child occurs. On the other level, the paper suggests that social work skills must be directed to assisting families establish more meaningful relationships and communication patterns with each other as well as learn appropriate child-rearing and disciplining skills so that further incidents of child abuse will not occur.

Introduction

Although, child battering is as old as the family it has only recently gained national prominence as a serious problem fraught with psychological and emotional sequaela for the victim as well as for the perpetrator. With growing public awareness of and sensitivity to the increased incidence of child abuse, the practitioners in child protective services are faced with a renewed sense of urgency to develop a sound knowledge base and practice skills which can enhance their ability to anticipate abusive assault before its occurrence and thereby institute preventive measures, or intervene appropriately after abuse has occurred.

Several authors suggest that social workers generally are ill-equipped in their training to deal with child abuse situations. This inadequacy, in large measure, accounts for their resistence and lack of proclivity to work with abusive parents (1,2,3).

There is also a growing concern voiced by professionals that the traditional approach, based on looking at the social phenomena intuitively, is not helpful in comprehending the underlying dynamic structures and the concomitant complex processes that generate the abuse phenomenon. It is, suggested, therefore, that social practitioners abandon the static view in favour of a dynamic perspective in their training and practice behaviour. This can serve to promote their effectiveness in not only gaining insight into our growing, complex, and interdependent social and technical systems, but also in their interventive endeavours. The dynamic view posits that since the practitioners plan of action is guided by his "account" of reality about certain phenomena it is, therefore, imperative that his "account" is based on scientifically tested and unbiased data streams (4). The purpose of this paper is to review the extensive literature on child abuse and develop an approximate account of reality about the phenomenon and, based on this information, derive a knowledge base (i.e., data streams) which will hopefully generate constellations of skills to guide the practitioners' activity in dealing with the child abuse cases.

Uni-Causal Theory of Child Abuse

Earlier authors attempted to interpret the causation or etiology of child abuse on a single dimension such as psychological, social economic, etc.

Psychological Model

The general orientation of the psychological model is disease oriented, symptom focussed and incriminates the perpetrator as the principal cause of abuse. It is assumed that the abusive parents have distinct personality characteristics such as: immaturity, impulsivity, sado-masochism, inadequacy, narcisism, pervasive anger, insecurity (5,6,7,8), and are hypersensitive and deficient in self esteem (9,8,10,11,12,13). Some authors saw the manifestation of the psychological disturbance in their distorted perception of the child who is viewed as if he were an adult who must meet parents needs for dependency and love. Morris and Gould labelled this phenomenon as role reversal (14). One explanation for the presence of the pathology in these parents lies in their childhood experiences characterized by abuse, neglect and violence. Violence represents a generalized form of behaviour which the abuser, as a child, was reinforced for maintaining (15,16,17,18,19). The process through which parents learn aggressive behaviour as children is known as modelling. When a child is physically punished for some transgression, he may learn to inhibit that behaviour but may also learn to physically punish transgression from parental demonstration.

Sociological Model

The sociological explanation premises that forces within society rather than within the individual are predominantly responsible for the occurrence of child abuse. Thus, this model shifts the blame from the parent to social and contextual factors. These factors relate to social class and its implications. The majority of the abusing parents

according to this perspective tend to be from lower socio-economic, educational, and occupational statuses (20,21,22). In addition, to limited financial means, there is evidence that these families suffer from unemployment (13,23,24,25,26,27) and overcrowded housing and living conditions. Congested dwellings increase the frequency and interaction and therefore a higher probability of conflict. All these factors in consert produce stress and frustration thus weakening the psychological mechanisms of self control.

One often cited characteristic of abusive families is their general isolation from the rest of the community (13,28,29,21,30,31,32,33,34,35, 36). Few contacts with the outside world means less vulnerability to public scrutiny of their child rearing practices. According to Kempe these families lack life-lines and during particularly difficult times have no outlet to release their volatile impulses except on the child (8).

Family Size and Marital Discord

Other characteristics which frequently appear to be associated with the occurrence of child abuse are the large number of children in a family born too close to each other (22,34,28,24) and marital disharmony (13,28, 37,30,38). It is hypothesized that each sociological variable is not considered to have a direct link with the incidents of abuse but rather interacts with each other variable and cumulatively produces situational stress and frustration for the caretaker. Gil refers to these situations as "triggering contexts" (20). Since the abusing parents lack adequate coping skills and physical aggression is the predominant strategy in their repertoire, they resort to striking out as an attempt to gain control over situations in which they feel powerless. The aggressive responses are

further facilitated in the presence of culturally sanctioned use of physical force in child rearing (20). Some investigators report that lower class families use violence more often and consider the use of harsh punishment in disciplining children as the acceptable norm (15,26).

Institutional Systems

Two authors Garbarino and Gil suggest that the institutional system is a vital factor in the etiology of child abuse. They maintain that it is the human ecology or institutional system which determines how adequately the social support system can function and thus reduce or alleviate stress (34,21). According to these investigators, the parental capacity for mothering and care taking is enhanced or undermined depending upon how the institutional systems (i.e., economic, political, legal, educational, etc.) are geared toward promoting family functioning. Where the institutional support is inadequate, the capacity of the immediate support system to function is reduced, thus producing greater stress factors and increasing the vulnerability of the child to physical assault. "Thus, the degree to which socio-economic forces support or conspire against the family as a setting for parent child relationships is hypothesized to be a critical factor in the etiology of child abuse/maltreatment" (21).

The Role of the Child in Abuse

Several authors are consistent in reporting that the child plays more than a passive role in abuse (39,40). This recognition is provided by victimological studies which suggest that child abuse is a function of complex interactive elements denoting reciprocity between the abuser and the abused (41). Also, some of the recent behaviourally oriented child

development theories propose a similar orientation and question the traditional unidirectional perspective on the socialization process. It is suggested that the child by virtue of his certain behavioural and physical characteristics shapes the behaviour of his own parent. This theoretical stance together with the frequent observation that it is often a single child who is selected from the siblings for abuse led Helfer to conclude that abuse is triggered by a "special" kind of child (42).

The research findings on the characteristics of children which make them high-risk for maltreatment can be described by using Gil's three major categories. Category one, refers to deviations in physical functioning such as physical handicaps (9,34,43,44), congenital abnormalities (45,46), delayed speech and failure to thrive, sickly, emaciated child (25,1,47). Category two, relates to deviations in social functioning such as hyperactivity (44), hostile, passive, aggressive, difficult to manage, whining, fussy, stubborn (48). Category three, includes children with deviations in psychological functioning such as mentally retarded, cognitive and neurological defects, intellectually precocious, emotionally disturbed (49,50,51,52,53,46).

Other characteristics that are believed to have an effect on the likelihood of subsequent abuse and have received considerable attention in the literature are prematurity, low birth weight (54,7,55,56,57,58, 46,59). In an attempt to explain why premature and low birth weight babies run a greater risk of physical abuse, these authors suggest that the infants with these characteristics are more likely to have developmental and behavioural problems such as a hypersensitivity, restlessness, distract-

ability, which make them very difficult to care for. The excessive demand on the caretaker is likely to generate high frustration. Additionally, premature infants are likely to be placed in intensive care for an extended period of time which potentially interferes with the development of social bonding between the mother and her neonate.

Research evidence also indicates that children conceived out of wedlock and those unwanted and unplanned babies increase the likelihood of their being rejected and thus run the risk of maltreatment (15,60,61, 62).

Genetic Factors

Quite frequently the research studies reviewed offer a strong hint of a missing link in the etiology of child abuse by suggesting that there are many parents who, though subjected to the same sociopsychological variables as well as the "special" child, do not abuse that child. Some authors hypothesize that for abuse to occur, in addition to the interplay of these variables, the presence of another condition is perhaps necessary if not sufficient, and they suggest the presence in the parent of the potential or predisposition for abuse (42). This suggestion turned the authors' attention to the genetic explanation for the elicitation, maintenance, and control of aggressive behaviour. The genetic explanation of aggressive behaviour is based on ethological and ontogenetic studies which have been conducted in most instances on primates and subhumans and, therefore, the application of their findings to humans has been limited.

Hormonal Influence

Recent evidence indicates that the development of aggressive behaviour is mediated in part by flunctuations in certain hormonal levels (63,64,65,66,67,68).

Goy administered a large dose of testosterone to pregnant monkeys and found that female offspring tended to exhibit masculinity in some anatomical and behavioural respects as contrasted with their siblings who were not exposed to testosterone. Karli reported that a raging bull can be converted into a gentle animal by lowering its androgen level through castration. Money and Ehrhardt at the Johns Hopkins' Clinic observed the relationship between excessive androgens and aggressive behaviour among female adolescents. The mother of these girls had been exposed to androgens before their birth. Similar findings were reported by Ehrhardt and Baker who studied over several years, 27 children who suffered from congenital adrenal hyperplasia (i.e., the fetus was exposed to exceptionally large amounts of self-generated androgens during pregnancy). They reported that as compared with the unaffected siblings the fetally androgenized girls showed a clear preference for vigorous, intense, physical activities. Further confirmation of the influence of male sex hormones on behaviour comes from studies by Yalom, et al, at the Department of Psychiatry, Stanford University. The investigator followed up 22 sons at age 6 and then at age 16. Their mothers were diabetics who were given moderately high doses of estrogen and progesterone during pregnancy and compared them with the sons of diabetic mothers who were not given exogenous estrogen. The two groups were matched on age, social class, living in the same community and attending the same school. They found that the estrogenized

boys were less assertive, showed less aggressive characteristics than the comparison group of boys.

Neurophysiological Studies

Recent discoveries in the field of neurophysiology strongly suggests that there are aggressive neural systems in the brain which are not active all the time but are sensitized and can be desensitized by certain blood constituents or by means of chemical changes in the blood. These interventions increased the pressure toward aggressive behaviour (69,70, 71,72,73). Kluver and Bucy also demonstrated that by interrupting or interfering with the neural system through surgery of the bilateral temporal lobe it is possible to reduce or eliminate aggressive tendencies (74,75,76). Later, Phillips, et al, confirmed that human beings are subject to neurogenetic fits of rage produced by spontaneous firings of cells in the brain (77). They assert that rage fits can be generated by electrical stimulation of the brain cells. More recently, it has been demonstrated that the activity of neural systems responsible for aggressive behaviour can also be reduced by the use of drugs called psychotropic drugs, such as phenothiazines, dilantin, etc.

Other investigators support the neurophysiological explanation of aggressive behaviour. Karli, for example, suggests that like many systems in the brain there are suppressor systems which are antagonistic to the aggression systems. He showed that lesions in the suppressor areas will turn a peaceful rat into an irritable mouse killer (65). Several investigators, notably Wood, experimented on a variety of animals and confirmed Karli's assertion by activating the suppressor systems in the brain thus resulting in the inhibition of ongoing aggression (78,79,80,81).

Brain Dysfunction and Aggressive Behaviour

Other investigators reported a link between pathological hyper-irritability and brain dysfunctions, for example, brain tumor (82,83, 84,85,86). Robinson, et al, observed that epileptic patients who had abnormalities in EEG and in the temporal lobe, also had behavioural aberrations (87). Some other researchers advanced the work of Robinson and his colleagues by operating on temporal lobe lesions both bilateral and unilateral on epileptic patients and observed a general reduction in hostility compared to their behaviour prior to the surgery.

Instinct Theory of Aggression

As early as 1920 Freud, the father of psychoanalysis, had postulated that a person has an innate drive for aggression, known as the "instinct theory" or the theory of "phylogenetic adaptations". McDougall designated it as a fundamental biological motive known as the hydraulic energy model of man's destructiveness which means that aggressive instincts constantly exert a mounting pressure necessitating the discharge periodically or diversion into other channels temporarily to slow the pressure (84).

As with any theoretical model, the neurophysiological and genetic theories of aggression are not without their critics. The notably behaviourist, Berkowitz, Bandura and Walter strongly believe that aggressive behaviour, like any human behaviour is learned through environmental contingencies.

In view of the research evidence in the field of neurophysiology and genetics it seems that the genetic and other biological factors having influence on aggression cannot be dismissed summarily. The position which is more acceptable to professionals is based on socio-

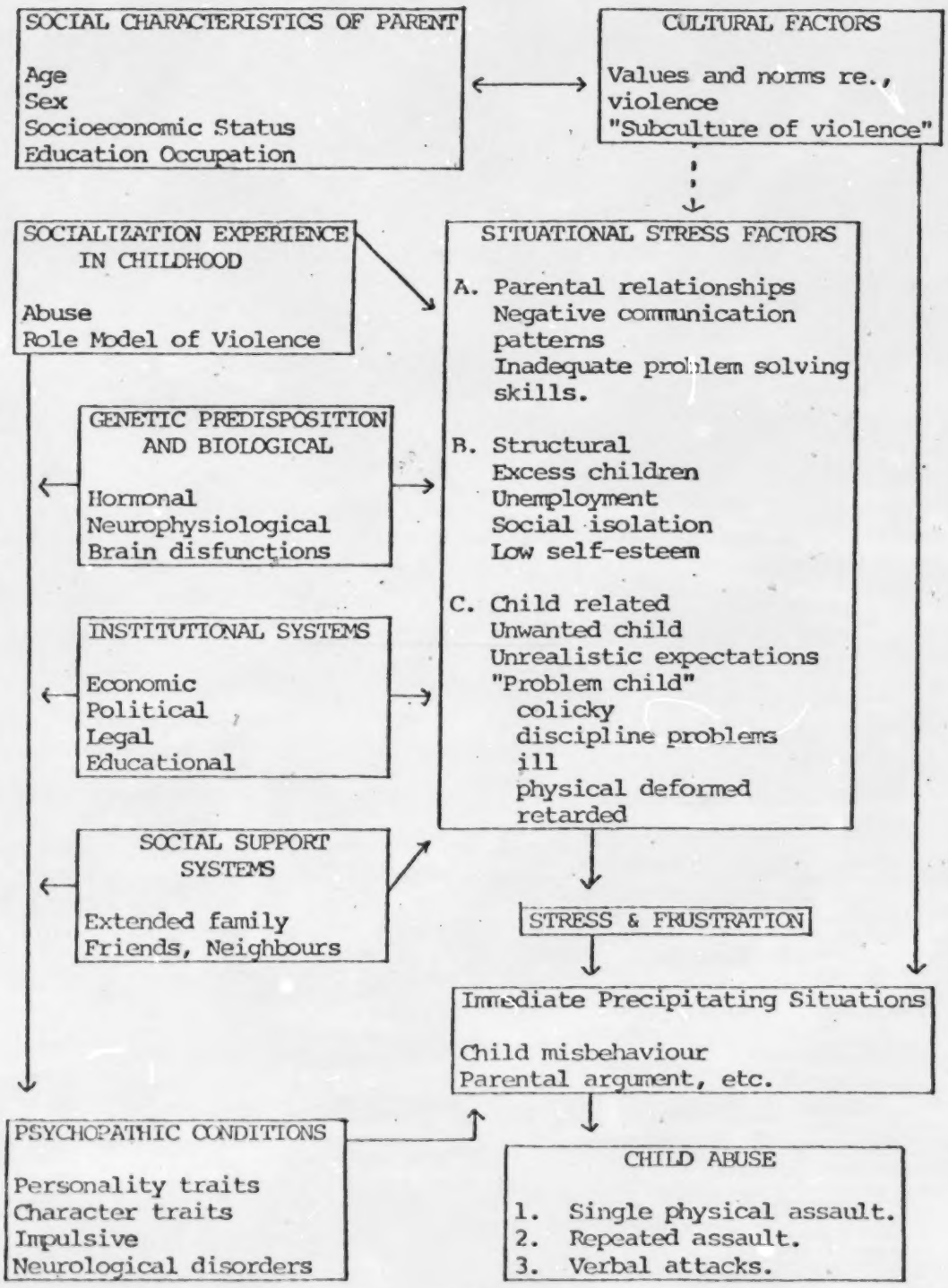
biological notions, which means, human beings are born with certain biological endowments and potentialities which interact with social and environmental forces to cause some modifications. But the limits of modifiability are genetically determined.

Toward a Comprehensive Model of Child Abuse

On the basis of the above discussion, it became apparent to the authors that any attempt to explain the etiology of child abuse on the basis of a single causal theory, is inherently illusionary and has limited effectiveness in suggesting interventive strategies to deal with child abuse incidents. An approach based on a fragmentary model, narrow in scope, distorts the multi-dimentional reality of human phenomena. The literature review makes it certain that child abuse is a function of complex interactions of multi-variables, involving adults, society and the child. Gelles, after realizing the deficiencies inherent in the traditional dichotomous approach to the occurrence of child abuse, proposed a social-psychological model of causation (61). The authors have proposed an extension of the model with a view to providing a more comprehensive, theoretical framework suggesting the dynamic and interactive nature of all the elements involved. (See next page).

A few comments on the proposed model seem necessary. Firstly, although child abuse is the outcome of interaction between several factors, the proportion each of these factors contributes to the etiology of child abuse varies from case to case. This is to say, in one case genetic factors may play a more dominant role than the other factors, while in the other case all the factors may represent a totally different configuration.

MULTI-CAUSAL MODEL OF CHILD ABUSE



Secondly, it should, however, be recognized that the authors do not claim the above causal model, or more appropriately, theoretical framework to be all encompassing and foolproof, for several of the research studies the authors have reviewed to derive this schema, themselves can be faulted on methodological grounds. The major pitfalls of the research are small and highly select samples, absence of control or matching groups, barring a few studies, lack of control for some confounding variables, inconsistent set of personality traits. Practically all of the research is ex post facto and therefore fails to distinguish the behaviour in question from the explanation. If there is an agreement between the authors, it is merely repetitive, a reiteration of the same characteristics. Very few studies employed standardized or objective measures. Spinetta and Rigler who also did a review of the research studies concluded, "what appears is a literature composed of professional opinion on the subject... Many start and end as broad studies with relatively untested common sense assumptions" (89).

Notwithstanding the weaknesses inherent in the research studies, the causal model presented can be viewed as a useful tool in presenting the research findings and providing a framework which can permit some guidelines in generating practice skills and suggesting direction in intervention. The data should also be of value for the identification target populations and target situations for intervention.

Practice Skills

With a limited knowledge base, the removal of the abused child from the family was considered the preferred and the easiest course of action in most instances. Both practice wisdom and the increased

knowledge about the abusing parent and abused children have demonstrated that removal of the child from his familiar milieu, unless it is absolutely indicated, can pose a serious threat to the sense of security and emotional health of the child. Sally A. Holmes, et al, have observed, "It is known that separation from even a severely abusive parent is traumatic to a child" (3). It is, therefore, recognized that the intervention strategies which focus on parents and their relationship with the child can be an effective alternative to the traditional approach. The ultimate aim of any treatment approach is to preserve the home so that a child can have his needs adequately met within his own natural family.

As a corallary to the above notion, it has become apparent that verbal insight oriented therapies with the abusive parent are ineffectual in bringing about behaviour change or in modifying the faulty interaction between the parent and child. Most abuse occurs in economically lower class parents who lack introspection which is necessary for successful psychotherapy (90,91,92,93). The disillusion with the cathartic therapies is further prompted by the effective use of behaviourally oriented approaches in teaching parents effective management of children's behaviour problems and modifying faulty parent child interaction in the home context, the setting in which abuse usually occurs (94).

In view of the knowledge gained from the literature survey it seems that the set of practice skills that social workers should have, fall into two categories: preactive related skills and reactive related skills.

Preactive Related Skills

Preactive related skills are aimed at strengthening the family unit

and enhancing its functioning so that child abuse can be prevented from occurring.

Early Identification of Potential Child Abusers:

To be sure, if there is a device available which can predict with reasonable accuracy whether certain parents have a high likelihood to abuse his or her child, this can admittedly prove a significant breakthrough in preventing a considerable number of child abuse incidents. To date, some efforts have been made to develop such a procedure but the questionable validity of these scales has rendered their discussion only speculative. According to Robert Friedman, the currently available predictive or screening measures have a high probability of making false negative errors (calling a parent non-abusive who actually turns out to be abusive) without at the same time committing a high percentage of false positive errors (calling a parent abusive who turns out to be non-abusive) (95).

The most comprehensive effort in developing a predictive scale has been undertaken by Schneider and his colleagues who tested their questionnaire on 500 women to identify if they reflect the child rearing attitudes and experiences that are so similar to those known abusers (96). Additional attempts at developing a scale to screen high risk parents has been made by Frankenburg (97), by Jane Gray and her associates (98), and Paulson, et al (99). Paulson, et al, derived an empirical scale through the analysis of responses by abusers and non-abusers to the M.M.P.I. What is being determined by these screening methods is a parent or parents who are likely to have difficulty with the parent-child interaction resulting in unusal child rearing practices. Considering the low predictive strength

of these devices, the most that can be hoped is that available procedures can serve a useful diagnostic tool for practitioners and alert them to the need for additional evaluation, follow-up, and supportive services.

Supportive Services:

We have seen in the discussion on levels of causation that the problem with parent-child interaction manifests itself depending upon how adequately the institutional as well as social support systems exist in the community and to what extent those are utilized by the families under stress. It is, therefore, necessary that the protection worker play an active role in providing such supportive services as day care centres, well baby clinics, foster grand parents, homemaker services, well publicized and comprehensive family planning and abortion programs integrated with maternal health care. It should be noted that one of the principal reasons which accounts for the lack of support for and even resistence to providing support service networks is attributed to the prevailing remedial perspective which permeates and guides the philosophy of our entire social services delivery. To overcome the public and the government resistence to such service is a difficult but necessary task and requires the protection worker to possess an ability to be an advocate, a mediator, a broker and an educator so that he or she can maximize his clients or potential clients opportunities to obtain their entitlement. If we view child abuse as a reaction to stress we can argue that any measures such as more income to families, fewer children and better housing, alleviation of child care responsibilities which result in stress reduction should make a significant contribution toward fewer child abuse incidents.

Family Life Education:

Another area in which the social worker can play an important role is in family life education for adults and teenagers. High school [illegible]ms an appropriate place where teenagers can be taught the tasks and demands of marriage, and phases of child development. Family life education can also be provided to parents in order to teach them parenting skills, a wide range of care-taking and disciplinary techniques and normal expectations in growth and development of babies and young children. Research studies have shown that faulty parent-child interaction is a function of the child's failure to meet various parental expectations which are often beyond the capacity of the child. It is largely due to the parental failure to know the age appropriate behaviour for the young child (35,100, 31,101,102,96). One additional component that can be included in the family life curriculum is the technique of resolving marital conflicts. Since the abusive parents lack more appropriate ways of handling their marital conflicts, and frequently resort to mutual violent means, they present themselves as a model for the child who may learn that aggressive behaviour is desirable when a resolution of conflict is needed.

Reactive Related Skills

The major goals of the reactive oriented skills are firstly, to prevent the future occurrence of neglect or abuse, secondly to alleviate the circumstances that have the likelihood of contributing to an abuse situation, and thirdly, to strengthen the family unit and preserve the home so that the child or children can have their needs adequately met within their natural and familiar milieu.

The larger societal changes recommended by Gil and Gelles such as

provision of adequate housing, state operated day care services, reduction of poverty, etc., though desirable goals, are going to take a long time to accomplish and even if these changes are instituted, their impact on reducing child abuse may not be as significant as has been hypothesized. If child abuse is an adaptation to stress, the parents need to learn more appropriate ways of coping with stressful situations at the interpersonal level. There are some fundamental changes that need to be affected within the parent-child dyad. Most of the interventive strategies, the authors have reviewed, are based on learning theory principles for their demonstrable superiority over traditional psychodynamically oriented therapies (103,104). Behavioural approaches are less time consuming; they deal with the present observable behaviour; the target behaviour can be operationally defined and thus measured. Differences can be evaluated by taking the baseline rate of behaviour and comparing it with the behaviour after intervention. It is particularly effective with parents with low educational and intelligence levels who are not used to abstract thinking and whose motivation to participate and stay in a therapeutic relationship depends on immediate and tangible gains. The strength of this approach lies in the fact that parents can be taught to be behaviour modifiers of their children's behaviour and since the operant behaviour is controlled by its environmental consequences, the behavioural therapies can be used in the home context (105,92,106). Most importantly, the fact that we assume reciprocity and interactivity between the abusing parent and the victim, the behavioural approach involves both parties to affect changes in stimulus-response and consequence patterns. Finally, since this paradigm

requires the active participation of the target clients, it ensures them freedom from unwanted help.

Reid has identified the general principles of task centered practice based on behavioural principles and have tested their effectiveness in the child protection services (103). Here we will briefly discuss the various intervention areas.

Marital Discord:

As has been said earlier the most common source of stress is interpersonal and it can affect the relationship between parent and child. Research studies point out to the high incidence of unstable marriages among abusive parents. According to Richard Stuart, social interaction is in part governed by some reciprocal exchange of rewards or attractiveness which provide mutual support (107). Since the ability of each partner to reinforce effectively depends on the availability of well established repertoire of social behaviours, the protection worker needs to teach the couple new and more appropriate ways of communicating with each other concerning their needs and how to respond to each others needs. The social worker must be the model for the development of problem solving skills in the parents (108,109). An additional task involves teaching the parents assertive behaviour, that is, the ability to freely express one's thoughts, feelings, and needs in an appropriate form. This can contribute toward development of self esteem.

Parent-Child Interaction:

It would seem valuable for an interventionist to acquire skills in making direct observation of behavioural interaction between parents and

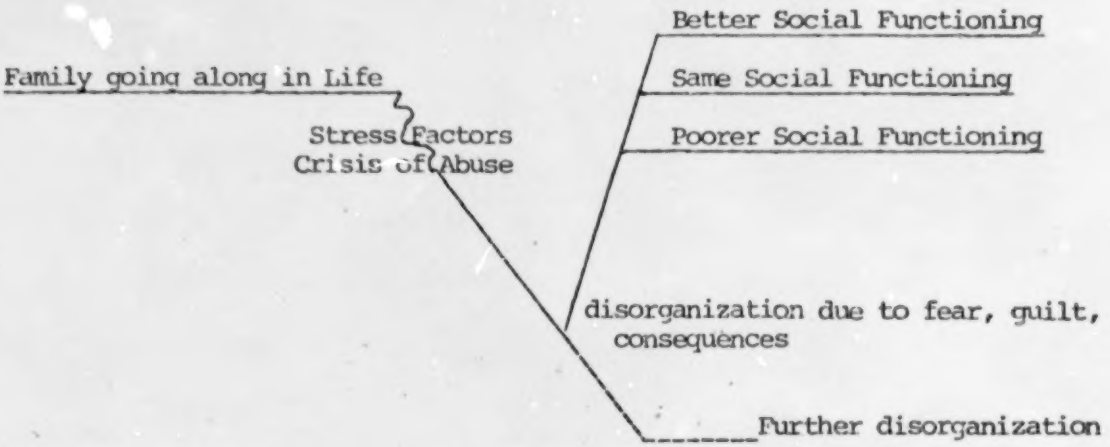
their children and changing the faulty interaction. According to Patterson and Reid, two important mechanisms of social interchange are reciprocity and coercion which characterize the shaping of children's annoying behaviour (110), and according to research findings, abusive behaviour tends to be a response to such annoying and aversive behaviour. Parents should be provided direct training in preventing the escalation of aversive interaction and in making appropriate response to unpleasant stimuli. Margaret Jeffrey has described methods to help abusive parents to learn new ways of responding to the child's aversive behaviour and changing negative interaction (111).

Group Work Skills:

There is evidence which demonstrates that the use of group work programs is very effective in providing abusive parents an outlet for their frustration. Groups composed of couples rather than individual mothers, or fathers, have been found particularly successful in achieving the participation of men. It has been found that men in the presence of other men are not deterred from expressing their point of view. Parents Anonymous is a kind of self help program which is being widely used in many parts of the country. Since abusive parents themselves organize these groups there is the presence of a high degree of motivation and willingness to recognize their socially unacceptable feelings and attitudes toward the abused child. Unreserved acceptance by parents of criticism and suggestions regarding the faulty child rearing practices from other group members is possible. Parents Anonymous groups have proven their usefulness in preventing the future occurrence of damaging relationships between parents and their children (112).

Crisis Intervention

It is our contention that child abuse is, by definition, a crisis situation which requires the expert intervention of a human services professional. Conceptually the crisis of child abuse may be illustrated by the following diagram derived from Hill (113) and Sachs (114).



Stress factors lead to the crisis of child abuse which may, depending on social circumstances, result in family disorganization. It is usually at that point that Social Work intervention occurs which eventually leads to better organization or on the other hand further disorganization (a possibility which is most undesirable).

Certain immediate tasks confront the social worker which are common to any other crisis situation (115). The social worker must find out about the precipitating factors that resulted in non-accidental injury to the child. Feelings and fears of the abusive parent must be explored. The usual coping capacity of the abuser must be discussed which will provide information about the parents' capacity for help and lead to a discussion of next steps. It is important to note that the family

in child battering is usually non-voluntary and has committed an offence which may have serious and far-reaching consequences for all family members. This requires that, not only will the social worker encourage a sense of trust in the family by offering understanding, empathy and support, but also must impose some degree of control on the family situation. The abused child may be removed to a foster home, may be hospitalized or may remain in the home. A court hearing may be required which will have as its goal the permanent or temporary wardship of the child. The social worker, therefore, must define the immediate procedures and the reasons for them while setting the stage for the longer term interactions.

The primary objective is to help the family regain a state approximately earlier equilibrium. In some situations, once this has been achieved, additional work will be necessary which may be in the form of individual and/or family treatment designed to teach parents child raising behaviour.

Use of Authority

The state as the guardian and the ultimate parent of every child, has the legal right and responsibility to intervene in situations requiring protection from neglect and abuse. This statutory right is delegated by the state to child protection agencies. The practitioners working in those agencies, therefore, carry constituted authority which legally obligates them to protect children from periolous situations as well as inherent or psychological authority determined by their professional knowledge and skills (116).

Child protection workers are often ambivalent in their role of authority with abusive parents. They fear that cooperation of the parents in getting evidence, a therapeutic relationship and the use

of authority are antithetical procedures. The dilemma and discomfort of the clinicians in respect to the integration of authority with 'treatment' is very eloquently described by Simon (117).

> "Heated controversy ebbs and flows about permissiveness toward acting out or indulgence of regression about the application of realistic limits, and about the frustration of forbidden impulses through personal supervision and restraint..." (p. 266)

The current thinking reflects the belief that if employed skillfully, authority can be a very useful and effective therapeutic tool in bringing about desired change in the behaviour of the abusive parents (118). Experience shows that parents want freedom not from the agency control but from their destructive impulses. The need to assume authority role assumes even greater proportion when one considers the fact that the majority of clients in protection services are involuntary and are usually resistent to accepting help. But once involved, the agency acting on the basis of the delegated authority and responsibility cannot withdraw and can invoke legal sanction, if necessary, until it becomes certain that the child is not longer in danger. The Canadian Welfare Council recommends that "the agency cannot leave a client free to accept or reject its service; nor can it withdraw only because the parent has refused or is unable to take help" (119).

It is, however, important that to be effective the child protection worker must understand the meaning of the authority role, be comfortable with his feelings about authority and must be genuinely concerned with the amelioration of the total family situation; the emphasis should be not on changing the parent but on changing the situation that brought about the physical assault.

Values

The growing awareness of child abuse as a social problem has recently altered the traditional parent-relationship equation thus causing a great deal of confusion, controversy and ambivalence for practitioners dealing with child abuse cases. The traditional absolute parental control and authority over their children presented little ambiguity as to their jurisdictional autonomy over their children and the use of physical force if necessary, to demand compliance. But the emergence of several factors such as discovery of childhood, the ideology of the sanctity of all human life, advances in scientific knowledge of child development and the productive capacity of the society have in concert transformed the societal attitude toward children from that of a mere "chattel" to the one that views children as individual entities with special needs. While this attitude recognises the parents control over their children, it also clearly implies parental obligations and appreciation of children's needs to have protection against neglect and exploitation and opportunities for maximization of their mental and physical growth.

The recognition of the status of the children is reflected in the U.N. Declaration of the Rights of the Child and is further reaffirmed in the designation of the Year 1979 as the International Year of the Child. Undoubtedly, these developments are indicative of the society's increased recognition of children as a valuable, national, human resource, but at the same time they have served to pose an irreconcilable dilemma and confusion for the protection workers who find themselves confronted by the problem of balancing parental autonomy against children's needs and interests. Part of the dilemma stems from the concept of family privacy

and individual liberty which reduces state intervention in family affairs. In a 1968 pornography case, the U.S. Supreme Court wrote that:

> ... constitutional interpretation has consistently recognised that the parents' claim to authority in their own household to direct the rearing of their children is basic in the structure of our society (120).

Another case, Stanley v. Illinois, in 1972 further confirmed that parental interest was considered to be a right protected under the due process clause of the U.S. Constitution (121).

However, it is also held that parents rights to custody carries concomitantly an assumption that their rights will not have an adverse effect on the children (122). It is the duality of parents and children interests which is central to this acrimonious debate and dilemma for the child welfare practitioners. This controversy is examplified in the recent U.S. Supreme Court decisions in cases of Wyman v. James and Kremens v. Bartley in 1971. This dilemma is further highlighted by strong sentiments voiced by some authorities that the termination of parental rights also includes their right to treatment (123,124,125,126). This notion has recently been formalised in some states of the U.S. which affirm the responsibility of an agency to make "deligent efforts" to provide treatment to parents aimed at restoring and strengthening their functioning before removal of the child from home is considered (127,128, 129,130). Newberger calls these dilemmas family autonomy versus coercive intervention and compassion versus control. She indicts the legal and medical profession for creating the ambiguity through their failure in defining the situations without equivocation where there is clear harm to a child (93).

At a more pragmatic level, it would appear that the parents right to custody has some merit. Since the child belongs to the family the parental commitment is to ensure that the child has a sense of security and identifies as a family member. Thus in spite of maltreatment of their children, the abusing parents may be of positive emotional value to the child. After all, parents are the only adults the young child has known in his life and many times we try to protect the children from those from whom the child does not want to be protected. The decision to remove the child should, therefore, be considered carefully keeping in mind the interest of the child, the parents and the agency. Should it become obvious that removal of the child is unavoidable then the agency must show that the action was deemed to be in the best interest of the child, and that the agency has adequate resources to help the parents fulfil their role as parents, once the child is removed.

Summary and Conclusion

We recognize that the search for new knowledge and understanding of social phenomena is unending. So, with the social problem of child abuse we too reiterate what has been said many times -- more research is needed to help human services professionals to understand the phenomenon of child abuse more clearly and to help design and develop treatment modalities that will be most meaningful to abusive families. That truism, however, cannot be stated without the concomitant challenge to the participants of this session. We recognize that we don't have the complete answer to child abuse nor do we feel we have a complete understanding of child abuse. Sharing our ideas with you, we hope will result in two occurrences: firstly, we hope that your comments, questions and

ideas will help us pursue our work more coherently and perhaps enable us to achieve a clearer understanding of this grave social problem; secondly, we hope that we have stimulated your thinking so that upon your return to your agency or your teaching responsibilities you will have new insights which will shed light on the problem of family violence, particularly violence toward children.

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